

## Checklist for the Release of the Sanitary Restriction on Subdivision Plats

- 1. <u>Complete</u> and <u>sign</u> the subdivision application and shallow injection well (drywell) registration forms and submit to Panhandle Health District.
- 2. Pay all necessary fees:
  - If the subdivision is on municipal sewer: \$200.00
  - If the subdivision is on individual septic systems: \$200.00 Plan Review Fee
    - After Plan Review has been completed: \$180.00 per each platted lot.
  - \$75.00 per injection well (drywell application required).
- 3. Pursuant to Idaho Code 50-1334, the water source must be stated on the plat.
  - This statement should be in the owner's certificate.
- 4. Two signature blocks must be included on the plat for the Panhandle Health District. One to approve the plat and one to lift the sanitary restriction in accordance with the Idaho Code 50-1326-1329.
- 5. Submit a copy of the plat <u>and</u> certification pages, along with the original mylars, to Panhandle Health District.
- 6. If the subdivision is served by a water system common to two or more lots, the plans and specifications for the water system must be approved by the Department of Environmental Quality. Panhandle Health District must receive a letter from the Department of Environmental Quality stating the plans and specifications are approved. If the water system serves more than 15 connections or 25 people, it will have to meet certain monitoring requirements. Contact the Department of Environmental Quality for requirements.
- 7. If the subdivision is served by municipal sewer or a new community system, the plans and specifications for the water system must be approved by the Department of Environmental Quality. Panhandle Health District must receive a letter from the Department of Environmental Quality stating the plans and specifications are approved.
- 8. Panhandle Health District must receive a letter from the water purveyor stating that they will supply water to the subdivision. (Does not apply to individual wells or new water systems constructed for the subdivision.)
- 9. If the subdivision will be served by individual septic systems, each lot must be approved by Panhandle Health District. There is a limit to the number of site visits based on the number of proposed lots.

  Development plans for 2-20 lots will be allowed a maximum of 4 site visits; an extra site visit will be added for each additional unit of 10 lots. Additional site work may require a Soil Analysis. Major revisions to plat after the Final Evaluation will require a new application.

## PANHANDLE HEALTH DISTRICT I Subdivision Application Form (Please type or print)

Please allow two weeks for application review

DATE OF APPLICATION		Assigned Subdivision #		
		-		
OWNER		APPLICANT		
Name:		Name:		
Address:		Address:		
City, State, Zip:		City, State, Zip		
Phone:		Phone:		
		Name of Contact Person:		
ENGINEER				
Name:		Phone:		
Address:				
City, State, Zip				
Phone:				
APPLICATION FEES			PHD RECEIPT #	
Subdivisions	with Municip	al or Comm	unity Sewer	Service
☐ Subdivision Fee				
With municipal water and municipal sewer		\$200	Date:	Receipt #:
Subdiv	visions with I	ndividual So	eptic Systems	
☐ Subdivision Plan Review Fee  Note: Plan is reviewed prior to payment of per lot fees.		\$200	Date:	Receipt #:
☐ Subdivision subsurface sewage disposal		\$180	Dute.	receipt ii.
		per lot fee	Date:	Receipt #:
Have you contacted: Division of Environmental Quality?				
CUI Parcel Number:	RRENT PAR	CEL INFOR	RMATION	
THE COLITICAL PROPERTY.		Townshi	in:	
		Range	·P·	

**Total Acreage:** 

## **Subdivision Information**

Subui	VISIOII IIIIOI IIIatioii				
NAME OF PLAT OR SUBDIVISION					
Number of Lots in Subdivision:	Average Lot Size:				
Inside Municipal City Limits:	Name of Municipality:				
Yes No	rame of Frameipanty.				
	sits based on the number of proposed lots. Development plans for sits; an extra site visit will be added for each additional unit of 10				
lots. Additional site work may require a Soil Arrequire a new application.	nalysis. Major revisions to plat after the Final Evaluation will				
	WATER SUPPLY				
NOTE: Water Source	e must be designated on Plat Signature Page				
Will the subdivision water be supplied by:					
☐ Individual wells					
☐ Community (2 or more lots):					
Name of Purveyor:					
Does the system serve any existing lots?	☐ Yes ☐ No				
Number of lots already served (if under	25):				
☐ Municipal:					
Name of Purveyor:					
SEWAGE DISPOSAL					
☐ Individual Subsurface Disposal					
☐ Community					
Name of System:					
☐ Municipal					
Name of Municipal Service:					
STORMWATER					
Type Of Disposal:					
☐ Shallow Injection Wells (drywells) (Application Required)	☐ Grassy Swale				
Service for:					
	and Lots				
CRITICAL	L/HAZARDOUS MATERIALS				
	Industrial Subdivision, complete the following:				
Are Chemicals or Petroleum products likely to					
stored/handled/used at these sites?	(Application for Business Required)				
	1 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (				
Applicant Signature:	Date:				
F F	~ ****				